



For Ecology Use

JUL 222005

Fee Paid 10

State of Washington

Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

State of Washington

Anne FTGA Timberlands, LLC	Section	I. APPL								
Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION Same as above Home Tel:	ıme <u>F</u>	TGA Timbe	erlands, LLC				Home Tel:()_		
Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION Same as above Same as above as above Same as	ailing <mark>Add</mark>	dress 2987	Griffin Ave.				Work 7	Tel:_(36	0) 802–558	31
Agranged Same as above Same Julie Stangell Home Tel.	ty <u>Enu</u>	mclaw		_StateW	A_Zip+4_98	3022+	FAX:	(360) 82	25-3492	
salting Address SAA Work Tel:(PERSON	TO CAL	L ABOU	JT THE A	PPLI	CATIO	N
StateZip+4 +FAX:()	ime <u>Jul</u>	lie Stangell					_ Home Tel	:()		
Land Manager, Hancock Forest Management, senior forester	ailing Add	dress		SAA			Work Tel:(
e applicant requests a permit to use not more than	ty			State	Zip+4	4	FAX:(_			
e applicant requests a permit to use not more than	lationship	to applican	ıt	Land Mar	nager, Hanco	ock Forest M	lanagement,	senior fo	orester_	
cubic feet per second) from a surface water source or ground water source (check only one) for the purpose(s not to exceed 5000 gallons per day for commercial forest management . ATTACH . EGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat mber is not sufficient. timate a maximum annual quantity to be used in acre-feet per year:	ection :	3. STAT	EMENT	OF INT	CENT					
A permit is desired forwell(s). A perm			araar quarrer	ty to be use.	d III acre-reet	per yearc		porjou		
ake, etc. If unnamed, write "unnamed spring," unnamed stream," etc.: Tokul Creek Size & depth of well(s): OCATION Conter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest ection corner: 190 feet south and 590 feet east of NE corner section 32 1820 feet north and 450 feet west of SE corner section 10 14 of		From _	r use is prop	posed for a s	short-term pr //	oject. Indic				vater will be need
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Appl. No.: 51-28267

ECY 040-1-14 Rev. 7/97 * * f

G-	CENEDAL WATER CYCTEM INFORMATION	
Sec	ction 5. GENERAL WATER SYSTEM INFORMATION	
A.	Name of system, if named: None	
B.	Briefly describe your proposed water system. (See instructions.)	
	Water will be drawn from at bridge or culvert using portable pump to fill a tank truck. Water vegetation control project to allow continued commercial forest management of property to 100,000 acres. Water will not be required from this source every year.	
C.	Do you already have any water rights or claims associated with this property or system? PROVIDE DOCUMENTATION.	☐ YES ☐ NO
	ction 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORM ompleted for all domestic/public supply uses.)	IATION
A.	Number of "connections" requested: Type of connection	
	Number of "connections" requested: Type of connection (Homes, Apartme	ent, Recreational, etc.)
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems of County Health Department.	LI YES LI NO
Con	plete C. and D. only if the proposed water system will have fifteen or more of	connections.
C.	Do you have a current water system plan approved by the	
C.	Washington State Department of Health? If yes, when was it approved? Please attach the current approved version	☐ YES ☐ NO n of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version	☐ YES ☐ NO n of your plan.
Sec	etion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION	
	omplete for all irrigation and agriculture uses.)	
A.	Total number of acres to be irrigated:	
В.	List total number of acres for other specified agricultural uses:	
	UseAcres	
	UseAcres	
	UseAcres	
C.	Total number of acres to be covered by this application:	
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977;	er 237, Laws of 2001)
	‡ Acreage proposed to be irrigated under this application;‡ Acreage proposed to be irrigated under other pending application(s).	
	1. Is the combined acreage greater than 6000 acres?	☐ YES ☐ NO
	2. Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no:	☐ YES ☐ NO
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle)	e. see helow)
	Stockwater - Total # of animals Animal type (If dairy cattled Dairy - # Milking # Non-milking	-, 222 23.011)

Sec	tion 8.	WATER STORAGE		
Will y	ou be usi	ing a dam, dike, or other structure to retain or store water?		□ YES □ NO
some p	portion of	ll be storing 10 acre-feet or more of water and/or if the water depth the storage will be above grade, you must also apply for a reservoir the Department of Ecology.	will be permit.	10 feet or more at the deepest point, and You can get a reservoir permit
Sec	tion 9.	DRIVING DIRECTIONS		
Provid	de detaile	d driving instructions to the project site.		
Diver	sion poin	o Mill Pond Road to Mainline road to Gate 4. Please note a kt #1: Mainline road to 27000 road to bridge across Tokul Creet #2: Mainline road to 28200 to 28210 to bridge across Tokul	ek.	permit are required for access.
Sec	tion 10	. REQUIRED MAP		
A.	Attach	a map of the project. (See instructions.)		
Sec	tion 11	. PROPERTY OWNERSHIP		
A.		ne applicant own the land on which the water will be used? explain the applicant's interest in the place of use and provide	the nan	☐ YES ☐ NO ne(s) and address(es) of the owner(s):
В.		ne applicant own the land on which the water source is located ubmit a copy of agreement:	d?	□ YES □ NO
to promonite emplo	ocess my toring pu byees of t	he information above is true and accurate to the best of mapplication, I grant staff from the Department of Ecology reposes. Even though I may have been assisted in the prephe Department of Ecology, all responsibility for the accurate to the best of mapplication.	access paration acy of	to the site for inspection and of the above application by the
Appli	gant (or a	Da D	16	
Lando	owner for	place of use (if same as applicant, write "same") Date of use (if same as applicant, write "same")	te	

We are returning your application for the following reason(s):		
Examination fee was not enclosed		APPLICANT PLEASE RETURN
Lxammation fee was not enclosed		TO CASHIER, PO BOX 5128,
		LACEY, WA 98509-5128
Section number(s)	is/are	APPLICANT PLEASE RETURN
ncomplete		TO THE APPROPRIATE
		TO THE APPROPRIATE
		TO THE APPROPRIATE
		TO THE APPROPRIATE
Explanation: Please provide the additional information requested above and r		TO THE APPROPRIATE REGIONAL OFFICE
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APPLICATION



